

Revised December 1974

# CALIFORNIA LIQUID WASTE HAULER RECORD

STATE WATER RESOURCES CONTROL BOARD  
STATE DEPARTMENT OF HEALTH

SFUND RECORDS CTR

999000484

## PRODUCER OF WASTE (Must be filled by producer)

Name (print or type): WBSLOCK CO Code No.       
Pick up Address: 13344 S. Main ST LA.  
Telephone Number:      P.O. or Contract No.       
Order Placed By:      Date:     

Type of Process       
which Produced Wastes:       
(Examples: metal plating, equipment cleaning, oil drilling--Code No.       
wastewater treatment, pickling bath, petroleum refining)

## DESCRIPTION OF WASTE (Must be filled by producer)

Check type of wastes:

- |  |   |
|--|---|
| 1. <input type="checkbox"/> Acid solution          | 8. <input type="checkbox"/> Tank bottom sediment        |
| 2. <input type="checkbox"/> Alkaline solution      | 9. <input type="checkbox"/> Oil                         |
| 3. <input type="checkbox"/> Pesticides             | 10. <input type="checkbox"/> Drilling mud               |
| 4. <input type="checkbox"/> Paint sludge           | 11. <input type="checkbox"/> Contaminated soil and sand |
| 5. <input type="checkbox"/> Solvent                | 12. <input type="checkbox"/> Genney waste               |
| 6. <input type="checkbox"/> Tetraethyl lead sludge | 13. <input type="checkbox"/> Latex waste                |
| 7. <input type="checkbox"/> Chemical toilet wastes | 14. <input type="checkbox"/> Mud and water              |
|  | 15. <input type="checkbox"/> Brine                      |

☐ Other (Specify)      Code No.     

## Components:

(Examples: Hydrochloric acid, lime, caustic soda, phenolics, solvents (list), metals (list), organics (list), cyanide)

	Upper	Lower	Concentration: t	ppm
1. <u>    </u>	<u>    </u>	<u>    </u>	<u>    </u>	<u>    </u>
2. <u>    </u>	<u>    </u>	<u>    </u>	<u>    </u>	<u>    </u>
3. <u>    </u>	<u>    </u>	<u>    </u>	<u>    </u>	<u>    </u>
4. <u>    </u>	<u>    </u>	<u>    </u>	<u>    </u>	<u>    </u>
5. <u>    </u>	<u>    </u>	<u>    </u>	<u>    </u>	<u>    </u>
6. <u>    </u>	<u>    </u>	<u>    </u>	<u>    </u>	<u>    </u>

## Hazardous Properties of Waste:

pH      ☐ none ☐ toxic ☐ flammable ☐ corrosive ☐ explosive  
Bulk Volume:      gal      tons      barrels (42 gal)      other (specify)       
Containers: (Number)      drums      cartons      bags      other (specify)       
Physical State: ☐ solid ☒ liquid ☐ sludge ☐ other (specify)       
Special Handling Instructions (if any):     

## HAULER OF WASTE (Must be filled by hauler)

Name (print or type): Superior Industrial Pumping Co Code No.       
Business Address: 2501 1/2 W. Manchester Ave. Ing.  
Telephone Number: 778-7642 Pick Up:      (Date)      Time:       
State Liquid Waste Hauler's Registration No. (if applicable): 483  
Job No.: 00808 No. of Loads or Trips:      Unit No.:     

Vehicle: ☒ vacuum truck 52 ☐ flatbed, ☐ other      (specify)     

The described waste was hauled to the disposal facility named below and was disposed of.

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

DISPOSER OF WASTE (Must be filled by disposer)  
Name (print or type): 2425 So. Garfield Ave Monterey Park Calif. 91754 Code No.     

The hauler above delivered the described waste to this disposal facility and it was an acceptable material under the terms of RWQCB requirements, State Department of Health regulations, and local restrictions.

Quantity measured at site (if applicable):      State fee (if any):     

## Handling Method(s):

- ☐ recovery  
☐ treatment (specify):       
☐ disposal (specify): ☐ pond ☐ spreading ☒ landfill ☐ injection well ☐ other (specify):

If waste is held for disposal elsewhere specify final location      Code No.     

Disposal Date: 10-21-75

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

The site operator shall submit a legible copy of each completed Record to the State Department of Health with monthly fee reports.

The waste is described to the best of my ability and it was delivered to a licensed liquid waste hauler (if applicable).

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Ronald Lewis 10/25/75

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

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No. 053